

25 1957

CHESHIRE COUNTY COUNCIL

EDUCATION COMMITTEE



REPORT

for the year 1957

BY

The Principal
School Medical Officer

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CHESTER:
PHILLIPSON AND GOLDER LTD., FRODSHAM STREET

STAFF

Principal School Medical Officer:

ARNOLD BROWN, M.B., CH.B., D.P.H.

Deputy Principal School Medical Officer:

B. G. GRETTON-WATSON, M.A., M.B., B.CH., D.P.H., Barrister-at-Law

Senior School Medical Officer:

H. CRAIG, L.R.C.P. & S., L.R.F.P.S.

Assistant County Medical Officers:

R. A. BLYTH, M.B., CH.B., M.R.C.S., L.R.C.P.	CHRISTINA LAING, M.B., CH.B., D.P.H.
R. CARGILL, M.B., CH.B.	HILDA LEVIS, M.R.C.S., L.R.C.P., M.B., B.S., D.P.H.
MARGARET CATON, M.R.C.S., L.R.C.P.	ELIZABETH LLOYD-JONES, M.B., B.CH.
R. J. CLARK, M.B., CH.B., D.P.H.	ALTA RAVENSCROFT, M.B., CH.B.
JENNY CRAIG, M.B., CH.B., D.P.H.	H. SUMMERS, M.SC., M.B., CH.B.
AITOLIA ENGLISH, M.R.C.S., L.R.C.P., M.B., B.S., D.C.H.	JESSIE TOUGH, M.B., CH.B., D.P.H.
BARBARA JONES, M.B., CH.B.	

Divisional School Medical Officers:

Altrincham—D. LONGBOTTOM, M.B., CH.B., D.P.H.	Nantwich—R. K. HAY, M.D., B.CH., B.A.O., D.P.H.
Bebington—F. S. MELVILLE, M.B., CH.B., D.P.H.	N.E. Cheshire—T. W. BRINDLE, M.B., CH.B., D.P.H.
Cheadle and Wilmslow—D. G. ANDERSON, M.B., CH.B., D.P.H.	Runcorn—E. N. H. GRAY, L.R.C.P. & S., L.M., D.P.H.
Crewe—D. G. CRAWSHAW, M.B., M.R.C.S., D.C.H., D.P.H.	Sale and Lymm—E. H. GORDON, M.D., B.CH., B.A.O., D.P.H.
Deeside—J. HATTON, M.D., D.P.H.	S.E. Cheshire—L. RICH, M.B., CH.B., M.R.C.O.G., D.P.H.
Hyde—F. W. C. BROWN, M.D., D.P.H.	S.W. Cheshire—W. J. BIRCHALL, M.B., M.R.C.S., L.R.C.P., D.P.H.
Macclesfield—H. R. DUGDALE, M.B., CH.B., D.P.H.	Stalybridge and Dukinfield— T. HOLME, M.B., CH.B., D.P.H.
Mid-Cheshire—W. S. SLATER, M.B., M.R.C.S., D.P.H.	

Paediatrician (Part-time):

J. D. ALLAN, M.D., F.R.C.P.

Ophthalmic Surgeons (Part-time):

B. BOAS, M.D.	C. JACOBS, M.D., M.B., B.S.
P. J. DEVLIN, M.B., CH.B., D.O.M.S.	E. RILEY, M.B., CH.B., D.O.M.S.
A. HOLMES-SMITH, M.A., M.B., B.CHIR., D.O.M.S.	L. R. C. ROSE, L.M.S.S.A., D.O.
	DOROTHY SIMMONS, M.B., CH.B.

Orthopaedic Surgeons (Part-time):

T. JACKSON, M.R.C.S., L.R.C.P.	G. T. PARTRIDGE, M.A., M.B., F.R.C.S.
E. M. KUPFER, M.B., B.S., F.R.C.S.	
J. L. MANGAN, F.R.C.S.I.	R. ROAF, M.A., F.R.C.S.
K. MARKS, F.R.C.S., M.CH.	G. A. WETHERELL, M.B., M.CH., F.R.C.S.
T. McSWEENEY, M.B., M.CH., F.R.C.S.	
A. G. O'MALLEY, M.CH., F.R.C.S.	

Ear, Nose and Throat Surgeon (Part-time):

E. M. INNES, B.SC., M.B., CH.B., F.R.C.S., D.L.O.

School Dental Surgeons:

A. F. HELY, C.B., L.D.S. (Principal)	LISBETH KIPPEN, L.D.S., D.P.D.
EDITH ANDREW, L.D.S.	A. N. LEICESTER, B.D.S.
J. B. ANDREW, B.D.S., R.C.S.	J. G. McCracken, B.D.S.
E. BRADLEY, L.D.S.	H. P. MEED, L.D.S.
DOROTHY COATES, L.D.S.	RUTH OWEN, L.D.S.
G. H. CRAINE, B.D.S.	BARBARA PETRIE, L.D.S. (part-time)
D. M. DODD, B.D.S.	E. S. POULTER, L.D.S.
G. J. HARTLEY, L.D.S.	J. A. REECE, L.D.S.
H. S. HOLLAND, B.D.S., L.D.S.	H. W. S. SHEASBY, L.D.S.
J. P. HUGHES, L.D.S.	E. J. TAYLOR, L.D.S.
R. H. HURST, L.D.S.	DOROTHY WALKER, L.D.S.
H. JACKSON, L.D.S.	

Health Visitors and School Nurses: 110.

Dental Nurses and Attendants: 25.

Clerk-Attendants: 12.

Speech Therapists:

JOYCE DAVENPORT, L.C.S.T.	VALMAI KENYON, L.C.S.T.
RAYLEEN EATON, L.C.S.T.	JOAN WREN, L.C.S.T.
KATHLEEN JONES, L.C.S.T.	

Chief Administrative Assistant:

B. O'CONNOR, M.A., Barrister-at-Law

Occupational Therapist :

MARGARET BACON. †

Physiotherapists :

CHRISTINA COOKE

JOYCE URMSON. †

†Appointed for treatment of children suffering from cerebral palsy.

INTRODUCTION

*To the Chairman and Members
of the County Education Committee.*

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the School Health Services for the year 1957.

I regret to have to report the death of Mr. F. C. Littleton, a Dental Surgeon of considerable ability and experience, who had given sterling service for many years in the Wirral area.

The number of pupils enrolled was 121,103 at the end of the year, an increase of 812 over the previous year. The percentage of pupils receiving school milk dropped to 69.7% whilst that for pupils in receipt of school meals fell to 45.3%.

A full staff of Assistant Medical Officers was maintained during the year. Dr. Gladys Wilkinson retired from active service at the end of the year. She had been a School Medical Officer in Cheshire for 29 years and was one of the few school doctors who had both a nursing and medical qualification, having served Cheshire as a Health Visitor for four years before enrolling as a medical student. She also served the St. John Ambulance Brigade for many years and was a member of the committee of the Schools Health Service group of the Society of Medical Officers of Health. I am glad to pay a tribute to her long, faithful and conscientious care for the health of Cheshire school children.

The general physical condition of the 34,713 children inspected remained good in that only 412 or 1.2% were considered to be unsatisfactory in this regard. Although the proportion of children who were found by the Health Visitors to be infested with vermin (3,955 cases found in 275,179 inspections) was quite low, it was nevertheless higher than in the previous year, whilst the number of cleansing orders issued (222) was almost double that in 1956. The number of children known to have been operated upon for adenoids and chronic tonsillitis declined during the year.

As the establishment of 28 whole-time dental surgeons is not complete, there being only 21 in post, great difficulty was experienced in maintaining an adequate dental service. The percentage of children accepting treatment through the School Dental Service was raised from 72% in 1956 to 76% in the year under review which shows the confidence felt by the parents of Cheshire children in the professional work of the County Dental Surgeons; it is also an indication of the support which the Dental Service receives from the head teachers of the schools, a support which is always greatly appreciated. The total amount of work done was less than in previous years and attention is drawn to the remarks of the Principal School Dental Officer regarding the unlikelihood of being able to recruit up to establishment during the next few years. The plain truth is, as pointed out by the McNair

Committee, that there are insufficient places in Dental Schools to train sufficient dental surgeons to satisfy the national need.

Arrangements are now in hand for informing a school leaver's family doctor of defects noted by School Medical Officers at medical inspection.

It will be noted in the section of this report contributed by Dr. Allan on the Paediatric Service that the work of the cerebral palsy team has enabled certain spastic children to go to an ordinary school which would not have been possible before the inception of this service. The team has been augmented by Dr. Cargill, a School Medical Officer who has undergone special training in the assessment of intelligence of handicapped pupils. A good working liaison has been established with the cerebral palsy unit at the Duchess of York Hospital, Manchester.

An interesting development in connection with testing of visual acuity amongst school entrants has been the adoption of the Sjogren test cards which have enabled a reasonable assessment to be made of the vision of those young children who cannot recognise letters. School Medical Officers are now supplied with Ishihara material for detection of colour blindness.

Both Grappenhall and Capenhurst residential special schools for educationally subnormal pupils are now in operation and I can only express the highest satisfaction with the efforts being made at these schools to produce responsible adult citizens out of those educationally subnormal children who for various reasons have been considered to need special education of a boarding type.

Selected Health Visitors have attended courses, arranged through the County Health Committee, at the Manchester University Department for the Education of the Deaf on early ascertainment of deafness and the use of the pure tone audiometer. Other courses on early ascertainment of deafness have been organised at county clinic centres, so that facilities are now available throughout the county for the testing of the hearing of children before they reach school age. When the necessary appointments of specialist teachers of the deaf have been made, it is hoped that it will be possible, with the co-operation of Professor Ewing and his staff working from Manchester University and with additional speech therapy, to arrange for a large proportion of partially deaf children to attend county clinic centres for tuition in lip-reading and help in the use of hearing aids, and to attend ordinary schools.

Samples of school milk are collected at the schools. During 1957, 944 samples were subjected to the phosphatase and Aschaffenburg-Mullen tests to determine efficiency of pasteurisation. Twelve samples failed the tests and appropriate action was taken by the County Health Department in the seven instances when the dairy concerned was within the county Food and Drugs Act area. In the remaining five cases, the responsible authorities under the Food and Drugs Act were informed. Out of 288 school milk bottles examined bacteriologically for cleanliness in the county laboratory, four were found to be either unsatisfactory or only fairly satisfactory, and in each case special

attention was paid to the bottle cleansing arrangements in the dairies concerned.

Head teachers of schools throughout the county have been asked to arrange for clinics to be held in schools for vaccination against poliomyelitis, tuberculosis and whooping cough and immunisation against diphtheria. Their attitude has been most co-operative and much of the success of these schemes is undoubtedly due to their help and support.

The establishment of a County Psychological Service is a pressing need. Whilst the Regional Hospital Boards have set up out-patient psychiatric clinics in many parts of the county, outside mental hospitals but working in close connection with them, and a child psychiatric unit is now operating at Clatterbridge Hospital, they cannot cope with the multitude of psychological disorders amongst children which are not psychoses and these become the responsibility of the School Health Service. Dr. Hugh Craig touches on this in his section of this Annual Report and one cannot escape the conclusion that only when the proposed psychological teams have been formed and are working, and not until then, will the problem of the psychological needs of Cheshire school children be met. This is work, not only of great importance to school children and education, but of a high preventive value when pupils leave school and enter adult life.

A total of 75 children were reported during the year as requiring examination to determine educability or otherwise. At the subsequent examinations 61 were found to be ineducable and thereupon reported to the County Health Committee, a decision was deferred for subsequent review in seven cases, six were considered able to attend school and home tuition was arranged in one case. In two cases, when a child had previously been reported to the County Health Committee as ineducable, improvement was subsequently noticed and the question of educability re-opened; in both cases the child concerned was then considered to be educable and attended school.

It would not be possible to maintain an efficient School Health Service without the willing and effective co-operation of the Director of Education, his administrative staff, the Head Teachers and indeed all members of the teaching staff. Such co-operation has been constantly given and I tender to them all, my grateful thanks.

I acknowledge with deep gratitude the continued help and co-operation which I have received throughout the year from the members of the Education Committee, the Clerk of the County Council, the County Treasurer and County Architect and the members of their staffs, and lastly I thank most sincerely the members of my own staff, both professional and lay, without whose unfailing efforts and friendship the work of the Schools Health Service could not be properly done.

I beg to remain,

Your obedient servant,

ARNOLD BROWN,

Principal School Medical Officer.

August, 1958.

General Statistics

The Administrative County of Cheshire comprised 42 County Districts, namely 10 Municipal Boroughs, 22 Urban Districts and 10 Rural Districts.

The population estimated by the Registrar-General at mid-1957 was 861,800.

The total number of Schools in the educational area at 31/12/57 with their enrolments was as follows:—

Primary	.....	.....	.....	.....	.....	463	80,830
Secondary (Grammar)	.....	.....	.....	.....	.....	22	13,777
Secondary (Modern)	.....	.....	.....	.....	.....	66	26,696

At the end of 1957, there were 84,384 children receiving school milk, and 54,831 receiving school meals.

One school was closed by the Principal School Medical Officer in 1957 on account of infectious disease.

The School Dental Service in 1957.

(from Mr. A. F. Hely)

(1) General

The year 1957 produced an unusual number of disturbing factors which operated against the smooth running of the School Dental Service.

The death of Mr. H. R. Parry, the Principal School Dental Officer was a great shock. The whole of his professional life had been spent in the service of the county and the Dental Scheme as it now exists was his life's interest and work. He had seen it grow from a small number of dental officers, operating with portable equipment, to the present organisation of 21 dental officers and 39 equipped dental clinics. The service and staff owe much to him.

Mr. Littleton's death, which occurred later in the year, was also a shock. He had spent a long and useful life as a public dental officer and men of his experience and calibre are difficult to replace.

There were two resignations of dental surgeons and two appointments during the year.

(2) Recruitment

The problem of recruiting suitable dental officers is increasingly difficult, and the immediate prospect of bringing the dental staff up to its establishment of 28 is not encouraging.

During the year 1958, a number of general dental practitioners in the Health Service will become eligible for retirement, and a national shortage of dental surgeons is to be expected for the next few years. The dental schools are now generally filled to capacity, but the effect

on the dental man-power situation will not be appreciable for some years.

The school dental service is not attracting young dental surgeons for three main reasons:—

- (a) The initial pay is less than that offered in private practice, and the increments offered are not attractive.
- (b) There is a feeling that full scope cannot at present exist in public service for their professional skill, although it would be quite untrue even to imply that this obtains in Cheshire.
- (c) The lack of promotion in the service is a deterrent.

The average number of children per dental officer in Cheshire county is about 6,000. On the other hand the Chief Medical Officer of the Ministry of Education states in a recent Annual Report that at the present time a ratio of at least one dentist to 3,000 children would be required for a complete service, though this can only be regarded as an ideal. Every effort is being made to increase staff up to the present establishment of 28.

(3) Clinics

(a) The Principal Dental Officer has surveyed the clinics and equipment in the health centres in the county and intends to make a detailed survey during 1958; although most of the equipment is in good order, there will be some recommendations for the replacement of some major items during 1958.

(b) An X-ray apparatus has been installed in the Bebington clinic and it is proving a great boon. It has supplied a long felt need in the Wirral, and Mr. Andrew, in whose surgery it is installed, is making excellent use of it, not only for his own cases but also for those of his colleagues in Wirral.

(4) Statistics

Staff

Including the Principal Dental Officer, the dental staff, expressed in terms of whole-time dental officers, numbered 21 in 1957. This is three less than the number employed in 1956 and means that each dental officer was responsible for nearly 6,000 children which is not a happy state of affairs.

Despite this discouraging position the dental staff have tackled the problem with cheerfulness and a determination to do the best possible under existing conditions.

Work done

(a) With the exception of one area the normal routine inspections have been carried out during the year and 63% of the school population has been inspected. An emergency clinic was held once a week in the

area (Winsford) which is at present without a dental officer.

(b) The figures presented in this report are for school children only and do not include work done on behalf of expectant and nursing mothers nor children under the age of five years.

(c) The number of children inspected and the amount of treatment per dental officer shows an increase on last year's figures.

(d) In 1956 the average number of children inspected per dental officer was 3,479, whilst in 1957 this number increased to 3,762.

(e) There were 1,451 children treated per dental officer in 1956 compared with 1,509 in 1957. Attendances for treatment rose from 2,344 in 1956, to 2,541 in 1957.

(f) The number of fillings inserted in teeth increased from 1,923 fillings in 1,435 teeth in 1956, to 1,985 fillings in 1,639 teeth in 1957, per dental officer.

(g) For the first time in many years the extraction figures are greater than those for fillings, the figures for 1956 and 1957 being respectively 1,831 and 2,116 per dental officer.

(h) Expressed as operations per 100 children the foregoing figures show that 128 fillings per 100 children were inserted during 1956 compared with 134 fillings per 100 children in 1957 and 124 teeth per 100 children were removed in 1956 compared with 140 per 100 children in 1957.

The increase of extractions over fillings is inevitable as routine inspections drop behind and more sessions are spent in relieving urgent emergency cases of painful conditions.

(5) Orthodontic and Other Treatments

(a) It is satisfactory to note that some time has been found for the specialised forms of dental treatment. In all 1,822 attendances were made by children for orthodontic treatment to clinics in the county. A further 178 children were referred for particularly specialised advice to dental hospitals.

(b) Crowns fitted numbered 24 and 144 X-ray photographs were taken during the year.

(c) Artificial dentures were fitted to 200 children, an increase of 14 from 1956 when the number was 186. The increase gives me no satisfaction to report.

(6) Holiday appointments

The number of dental appointments which were kept during the school holidays in 1957 showed a considerable rise. In 1956 appointments kept were 58% of those made. In 1957 the number increased to 65%. The very inclement weather which was experienced throughout the school holidays may have had much to do with this rise.

School Buildings

The following major works were completed or in progress during 1957. In addition to these works a large number of minor works of alterations, additions and improvements were carried out as well as the normal maintenance work to schools throughout the County:

WORKS COMPLETED

New Schools

Congleton Grammar School for Girls
Eastham Junior School
Ellesmere Port Stanney Secondary School
Grappenhall Hall Special School
Great Sutton Junior School
Lymm Grammar School
Mid-Cheshire Technical College
Neston Secondary School
North-Cheshire Technical College
Northwich Grammar School for Girls
Stalybridge Primary School
Shavington Secondary School
Tarporley Secondary School

Extensions and Alterations

Cheadle Broadway Secondary School
Helsby Grammar Schools
Marple Secondary School
Nantwich & Acton Grammar School

IN COURSE OF ERECTION

New Schools

Barnton Secondary School
Christleton Secondary School
Crewe Grammar School for Girls
Crewe Secondary School for Girls
Ellesmere Port Grammar School
Macclesfield Secondary School for Boys
Marple Primary School
Huntington Primary School
Partington Primary School
Runcorn Secondary School

Extensions and Alterations

Altrincham Wellington Road Secondary Schools
Bredbury Secondary School
Bebington Secondary School
Crewe County Training College

Hyde Flowery Field Secondary School
 Lymm Controlled Grammar School
 Macclesfield High School for Girls
 Poynton Primary School
 Sale Moor Secondary School
 Sale County Grammar School for Girls
 Tattcnhall Secondary School
 West Kirby County Grammar School for Girls
 Winsford Verdin Grammar School
 Wistaston Primary School

SPECIAL SERVICES REPORTS

Ear, Nose and Throat Service.

(from Mr. E. Innes).

There is not much to note as regards this Speciality last year.

The waiting time for removal of tonsils and adenoids was about the same as the previous year. This is probably because a balance has been reached between the cases placed on the waiting list and those admitted to hospital.

Those cases which merited early admission were given priority.

The question of priority admission always brings the risk of complaints from the parents of the other children, who do not understand why the priority cases were admitted early. Happily there has been little trouble as regards this so far.

It is gratifying to see the waiting list in the Dukinfield, Hyde and Stalybridge areas being reduced.

I think that the rather uneconomic method of admitting these children to Macclesfield has been well worth while as many of them urgently required treatment.

The number of cases of ear infection, both acute and chronic, was about the same as the previous year but there was an increase in the number of cases of partial deafness seen.

I think the reason for this is that the teachers now report cases which they suspect to be deaf sooner than they used to do.

There is nothing to report in the other aspects of the Speciality.

ATTENDANCES AT E.N.T. CLINICS, 1957

Alsager	.....	.....	.....	40	Hazel Grove	.....	.....	.....	12
Cheadle	.....	.....	.....	43	Macclesfield	.....	.....	.....	33
Congleton	.....	.....	.....	19	Northwich	.....	.....	.....	60
Crewe	.....	.....	.....	39	Poynton	.....	.....	.....	28
Dukinfield	.....	.....	.....	87	Sandbach	.....	.....	.....	61
Ellesmere Port	.....	.....	.....	59	Winsford	.....	.....	.....	28

Ophthalmic Service

(from Dr. A. Holmes-Smith).

The end of this year marks a period of ten years since your Committee appointed their Ophthalmologist—originally on a full time basis. It is, perhaps, a convenient time to review the progress of the Ophthalmic clinics in the County.

One of your Ophthalmologist's early tasks was to advise upon the design of a simple but inexpensive test-type cabinet for use in the clinics. The result of this is that the ophthalmic examination records of the various clinics are now comparable, having been made with similar apparatus regardless of the clinic in which the patient is examined. This is most useful at the present day when changes of abode are common.

A new record card which matches the general health record of the pupil has also been devised and is of adequate size to contain all the details of a patient's ophthalmic treatment during his school career. With this has gone a steady increase in the co-ordination of the work of the clinics with that of the General Practitioner—this is now reflected in the growing number of patients who attend your Ophthalmologist's hospital clinics after leaving school—thus achieving continuity of treatment.

Your committee has also in this period agreed to provide splinterless lenses at no added expense to the parent in those cases in which the Ophthalmologist considers this feature desirable for the safety of the eyes—i.e. in certain patients who need to wear glasses constantly. This measure not only results in patients wearing their glasses as advised but relieves the anxiety which many patients feel about damage to the eyes from the breakage of lenses. This is fortunately a rare occurrence but one which will usually result in the loss of the sight of any eye so injured.

The far-seeing policy of your Committee in appointing Ophthalmologists associated directly with hospitals wherever possible has borne fruit in the ease of access of patients to hospital treatment—either operative or medical—and to Orthoptic treatment which is now reasonably available in the greater part of the County. Any patient who requires operation and whose parents desire this, may expect to have operation before leaving school.

During 1957 there has been steady progress of the work of the Ophthalmic Clinics incorporating the items mentioned above. The statistics relating to the work will be found elsewhere in the Report. Your Ophthalmologist would like, in particular, to comment upon the interested help which he has had from the Health Visitors connected with his clinics.

ATTENDANCES AT EYE CLINICS, 1957.

Alsager	----	----	205	Macclesfield	----	----	984
Bollington	----	----	128	Marple	----	----	128
Bredbury	----	----	209	Middlewich	----	----	158
Cheadle	----	----	208	Nantwich	----	----	414
Cheadle Hulme	----	----	117	Neston	----	----	178
Congleton	----	----	290	New Ferry	----	----	811
Disley	----	----	10	Northwich	----	----	990
Dukinfield	----	----	505	Poynton	----	----	68
Ellesmere Port	----	----	669	Runcorn	----	----	582
Frodsham	----	----	246	Sale	----	----	439
Hale	----	----	448	Sandbach	----	----	570
Hazel Grove	----	----	106	Stalybridge	----	----	328
Heswall	----	----	318	Stockton Heath	----	----	192
Hoole	----	----	161	Tarporley	----	----	130
Hoylake	----	----	335	Weaverham	----	----	224
Hyde	----	----	393	Wilmslow	----	----	177
Knutsford	----	----	90	Winsford	----	----	295
Lymm	----	----	239				

Paediatric Service

(from Dr. J. D. Allan).

The County Paediatric Service has retained the same basic framework as in previous years, i.e. in each calendar month three consultative clinics for general cases are held, two in Crewe and one in Northwich. These are relatively well attended, particularly Northwich and the service is appreciated by the local practitioners. As in previous years, as far as possible hospital facilities available either in Crewe or Northwich are used to avoid unnecessary expense on transport, but, at the same time, in cases in which special investigation is necessary, admission to the Paediatric Unit in the Macclesfield Hospital is arranged. As in previous years there has been a steady admission to Macclesfield of cases requiring special investigations and the entire service has, therefore, continued to prove invaluable for the child population of Crewe and Northwich; two towns for which there is no Regional Board Paediatric cover.

In addition to the general medical consultative clinics, there is now a smooth-running peripatetic Cerebral Palsy team. This is headed by a Paediatrician and composed thereafter of a specially trained physiotherapist, an occupational therapist, a speech therapist and a School Medical Officer, who is now fully trained in the intellectual estimation of the cerebral palsy child and in the intelligence testing of children under the age of 2. There is, of course, also available the County Ophthalmologist and the E.N.T. Consultant, but in particular a working liaison has been arranged with Professor Ewing of Manchester University in respect of hearing defects in these

children. The specialised knowledge of the School Medical Officer, in my opinion, is proving increasingly valuable as one of the most difficult aspects of the cerebral palsy child in this younger age period. This whole team, of course, is sponsored and re-inforced by the County Medical Officer and his deputy and the basic project, as envisaged by our sponsors, has been to diagnose and assess and treat cases of cerebral palsy as early as possible. To this end, in the past year, attempts have been made to increase liaison with and enhance the knowledge of not only the School Medical Officers in general but the Health Visitors in particular. A series of short papers and demonstrations to this end have been given to the County Health Visitors and School Medical Officers.

In addition, during the past year, following on the growing interest in the whole subject of cerebral palsy, there has been a Regional meeting of the Manchester Region under the chairmanship of Professor Gaisford. At this meeting of people in the Manchester region interested, concerned and working on cerebral palsy, cases were demonstrated. The County Paediatrician had the honour of opening the meeting with a paper on "The Paediatrician and cerebral palsy".

In so far as objective factors are concerned, our team operates at Crewe and Macclesfield, Cheadle and Northwich and the Paediatrician holds a consultative clinic once a month at Macclesfield, Cheadle and Northwich and twice a month at Crewe. There is liaison again with the local Orthopaedic Consultant from the point of view of orthopaedic measures necessary for any individual case.

The total number of cases on the register at the time of writing is 34 of which upwards of 65% are under the age of 5 years and of this total number 10, I am glad to say, attend ordinary school. We have found that through the intermediary of the School Medical Officers we have been able to persuade, in several instances, the headmasters and mistresses to take cases to ordinary school, cases which previously would have simply languished at home.

The parents in general undoubtedly greatly appreciate what is being done and the attendance of children is invariably in the region of 100%.

On the first Monday of each month, the ward round tutorial at West Park Hospital for School M.O.'s is held as before.

The only recommendation is that clearly there is still need for better provision in the County for disposal of mentally retarded, ineducable children and probably, in addition, for facilities for convalescence for the child under the age of 2 years.

ATTENDANCES AT PAEDIATRIC CLINICS, 1957.

Crewe, Ludford Street	34	Northwich, Darland House	62
Crewe, Stalbridge Road	45		

Orthopaedic Service

The orthopaedic service is the financial responsibility of Regional Hospital Boards under the National Health Service Act. The methods of ascertainment remain the same, children being referred to the surgeons by private doctors, or (with the approval of the private doctor) by School Medical Officers after medical inspection at schools or minor ailment clinics.

ATTENDANCES AT ORTHOPAEDIC CLINICS, 1957

Dukinfield	.....	.....	.....	1287	Northwich	.....	.....	.....	480
Ellesmere Port	.....	.....	.....	199	Runcorn	.....	.....	.....	872
Hyde	.....	.....	.....	1018	Stalybridge	.....	.....	.....	1336
New Ferry	.....	.....	.....	491	Stockton Heath	.....	.....	.....	517

Children attending for sunlight treatment are the responsibility of the local authority unless referred for it by the specialist. The following were the attendances during 1957 by school children at the clinics specified:—

Dukinfield	.....	1555
Ellesmere Port	.....	19
Hyde	.....	1246
New Ferry	.....	260
Sale	.....	561
Stalybridge	.....	943

Psychological Service.

(from Dr. H. Craig).

This year has been one of the heaviest in the demands made on the Psychological Services, and one cannot escape the impression that the demands would have been even greater were the facilities available. More requests have come from the Magistrates of Juvenile Courts for psychiatric reports than in previous years—there were 38 boys and 5 girls of school age. There are 134 cases on the books and the waiting list at the time of writing stands at 72.

I look forward to the establishment of a first psychiatric team, and in particular to the help that can be given to parents who will have available to them the advice of a trained Psychiatric Social Worker.

The following list gives some indication of the types of problem dealt with during the year, and once again I would take this opportunity of expressing a sincere thank you to all who have co-operated in any way.

- (1) BEHAVIOUR PROBLEMS:—truancy 7, stealing 30, wandering 8, difficult behaviour 15, lying 5, others 2.
- (2) PSYCHOSOMATIC:—enuresis 4, asthma 1, others 6.
- (3) EDUCATIONAL:—backwardness 6, home tuition 1, school

difficulties 4, suitability for grammar school 2, boarding school 6.

- (4) PERSONALITY DISORDERS:—cruelty and aggression 8, fears and nervousness 6, sex difficulties 5, others 1.
- (5) OTHERS:—suitability for adoption 1, speech difficulties 3, E.S.N. 10, M.D. 11, early psychosis 5.

Torpenhow Open Air School

The school is situated on the hill at Frankby overlooking the estuary of the River Dee.

There is accommodation for 78 pupils suffering from malnutrition, general debility and chest conditions such as asthma, bronchitis, and bronchiectasis. In addition, children who are contacts of cases of open pulmonary tuberculosis are segregated from the source of infection by being admitted to the school. School children of both sexes within the age range of 7-11 years are admitted.

Children suitable for admission are selected by the School Medical Officers at medical inspections and enter Torpenhow Open-Air School initially for a period of six months, this being renewed if found to be necessary. Pupils remain at Torpenhow throughout the year, with the exception of the month of August, and attend the school during the normal school term. During the school holidays a number of recreational activities such as walks, picnics, games and visits to places of interest are organised.

Owing to the general improvement in the health of children and housing conditions generally over the past few years it will be noted that the demand for open-air school education by Cheshire children has declined, and the occupancy of the school during the year has fallen. In consequence of this, a number of local Education Authorities have been given particulars of the school with a view to inviting applications for suitable children residing within their areas. A number of authorities are showing a desire to take up these places and the occupancy has risen considerably since the end of 1957.

During the year 117 children were admitted and 125 were discharged. They were classified according to their various disabilities as follows:—

	<i>Admissions</i>		<i>Discharges</i>	
	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>
General Debility	39	42	52	34
Asthma	13	2	17	3
Bronchitis	9	6	12	6
Bronchiectasis	—	—	—	—
Tuberculosis contacts	2	1	1	—
Eczema and Asthma	1	2	—	—
	64	53	82	43

Mary Dendy School

In January, 1957, 64 boys at the Mary Dendy School were transferred to Grappenhall Hall School and in January, 1958, 34 girls were transferred to Capenhurst Grange School.

Grappenhall Hall School

This school has 100 places for educationally sub-normal boys generally within the I.Q. range of 55-75 aged 8-16 years, who suffer from additional difficulties such as poor environment, maladjustment, delinquent tendencies. In certain cases boys are admitted for a trial period in order to determine whether or not they are educable when this is in doubt.

The progress of the boys is kept under constant review and those who prove to be ineducable are excluded. At the other end of the scale a watch is constantly kept for the boy who makes exceptionally good progress which may justify his re-entry to an ordinary school. As a result of this constant review, there is an indication that the majority of boys remaining at the school to the age of 16 years will be able to take up ordinary employment.

The increased number of places for boys (100 at Grappenhall compared with 67 at the Mary Dendy) was welcomed, and the waiting list was considerably reduced, at least temporarily.

Capenhurst Grange

In January 1958, 34 girls were transferred from the Mary Dendy School. The school accepts the same type of child, and is conducted on the same general lines as Grappenhall Hall.

Unfortunately the number of residential places for educationally sub-normal girls has not materially increased (38 at Capenhurst, compared with 37 at the Mary Dendy), consequently the waiting list remains long.

HANDICAPPED CHILDREN

Numbers Attending Special Schools, 1957.

BLIND AND PARTIALLY SIGHTED	Boys	Girls	Total
Birkenhead, Sight Saving Classes	3	—	3
Chorley Wood, College for the Blind	—	2	2
Coventry, Exhall Grange School for Partially Sighted	—	1	1
Kingwinford, Sunshine House	1	—	1
Liverpool, St. Vincent's School for Catholic Blind	3	2	5
Liverpool, Wavertree School for the Blind	8	2	10
Old Trafford, Henshaw's Institution for the Blind	3	1	4
Preston, Fulwood School for the Partially Sighted	5	5	10
Shrewsbury, Conover Hall	1	1	2
Wellington, Overley Hall Sunshine Home	1	1	2
Worcester, College for the Blind	2	—	2

DEAF AND PARTIALLY DEAF

Boston Spa, St. John's School for the Deaf	—	2	2
Burton-on-Trent, Needwood School for the Partially Deaf	—	5	5
Liverpool, Crown Street Day School for the Deaf	1	—	1
Manchester, Royal Residential Schools for the Deaf	38	32	70
Newbury, Donnington Lodge School	—	1	1
Newbury, Little Abbey School	1	—	1
Newbury, Mary Hare Grammar School	—	1	1
Oxford, St. Edward's School	1	—	1
Preston, Royal Cross School for the Deaf	—	1	1
Southport, Liverpool School for Partially Deaf	12	6	18
Stoke-on-Trent, North Staffordshire School for the Deaf	2	—	2

DELICATE AND VARIOUS

Ashton-under-Lyne, General Hospital	3	3	6
Aylesbury, Stoke Mandeville	—	3	3
Bebington, Clatterbridge Hospital	139	159	298
Birkenhead, St. Catherine's Hospital	1	4	5
Birkenhead, Thingwall Hospital	1	—	1
Brecon, The Penoyre House School	1	—	1
Camborne, Tehidy Sanatorium School	1	—	1
Davyhulme, Park Hospital	—	2	2
Durham, Dryburn Hospital School	1	—	1
Frankby, Torpenhow Open-Air School	100	68	168
Heswall, Cleaver Sanatorium	4	—	4
Heswall, Royal Liverpool Children's Hospital	9	7	16
Leasowe, Open-Air School	1	3	4
Liverpool, Alder Hey Hospital	10	2	12
Liverpool, The Underlea School	1	—	1
Macclesfield, West Park Hospital	39	50	89
Manchester, Booth Hall Hospital	3	8	11
Manchester Royal Children's Hospital	3	3	6
Stockport, Longfield Open-Air School	1	—	1
West Kirby, Children's Convalescent Home	5	1	6
Wythenshawe, Hospital School	19	9	28

EDUCATIONALLY SUB-NORMAL	Boys	Girls	Total
Aberdeen, Camphill (Rudolf Steiner) School	1	1	2
Bolton, Crowthorn School	1	--	1
Bristol, The Hatch (Rudolf Steiner)	1	--	1
Bristol, Thornbury House (Rudolf Steiner)	1	—	1
Capenhurst, Capenhurst Grange School	—	34	34
Grappenhall, Grappenhall Hall School	91	—	91
Liverpool, Allerton Priory R.C. School	--	2	2
Middlewich, Bostock Hall	—	1	1
Reigate, Salmon's Cross School	2	--	2
Ringwood, West Mount (Rudolf Steiner)	--	1	1
Southborough, Meadows House School	1	--	1
Stroud, Farmhill House School	1	--	1
Wallasey, Claremont Day School	--	1	1

EPILEPTIC

Alderley Edge, Colthurst House School	5	5	10
Kendal, Sedgwick House School	1	--	1
Lingfield, School for Epileptics	1	1	2
Liverpool, Maghull Homes	3	2	5

MALADJUSTED

Bolney, Ferney Close	—	1	1
Dulwich, Rudolf Memorial School	—	1	1
Harmer Hill, Shotton Hall School	3	—	3
Hooke, St. Francis School	1	—	1
Market Drayton, Cloverley Hall	1	—	1
Old Alresford, Alresford Place	—	1	1
Stow in the Wold, St. Hilliards	1	—	1
Thelwall, Chaigeley	1	—	1

PHYSICALLY HANDICAPPED

Crippled (non-tuberculous)

Biddulph, Orthopaedic Hospital	1	3	4
Bebington, Clatterbridge Hospital	17	22	39
Carshalton, Queen Mary's Hospital	—	3	3
Chailey, The Heritage Craft School	1	--	1
Harpenden, Elmfield School	--	2	2
Hartshill, Orthopaedic Hospital	—	1	1
Heswall, Royal Liverpool Children's Hospital	2	2	4
Killinghall, Ian Tetley Hospital School	1	1	2
Leasowe, Open-Air Hospital	7	8	15
Liverpool, Alder Hey Hospital	—	1	1
Liverpool, Children's Rest School of Recovery	2	2	4
London, Halliwick Cripples' School	—	1	1
Manchester, Booth Hall Hospital	2	1	3
Marple, Children's Orthopaedic Hospital	6	5	11
Mobberley, Margaret Barclay Special School	4	3	7
Oswestry, Orthopaedic Hospital	50	41	97
Oswestry, Derwen Cripples' Training College	1	—	1
Oxford, Wingfield Orthopaedic Hospital	1	—	1
Salford, Bethesda Home	4	1	5
Silverdale, Bleasdale House Special School	1	—	1
Southport, The Bradstock Lockett	—	1	1
Stanmore, Royal National Orthopaedic Hospital	—	1	1
Thorp Arch, Marguerite Hepton Hospital Special School	1	—	1
Tickhill, Hesley Hall Special School	1	—	1
Tonbridge, The Thomas De La Rue School	1	—	1
Wellingborough, Hinwick Hall	1	—	1
West Didsbury, Lancasterian Special Day School	—	3	3
Wigan, Wrightington Hospital School	—	2	2

<i>Heart</i>	Boys	Girls	Total
Ashton-under-Lyne, General Hospital	—	1	1
Bebington, Clatterbridge Hospital	2	1	3
Leasowe, Open-Air Hospital	—	1	1
Rainhill, St. Joseph's Heart Hospital School	2	1	3
Salford, Hope Hospital	—	1	1
West Kirby, Children's Convalescent Home	—	1	1

<i>Tuberculous</i>	Boys	Girls	Total
Abergele Sanatorium	13	6	19
Bebington, Clatterbridge Hospital	4	1	5
Heswall, Cleaver Sanatorium	37	37	74
Heswall, Royal Liverpool Children's Hospital	4	—	4
Leasowe, Open-Air Hospital	—	1	1
Macclesfield, West Park Hospital	—	1	1
Manchester, Booth Hall Hospital	—	1	1
Manchester, Royal Children's Hospital	1	—	1
Marple, Children's Orthopaedic Hospital	4	2	6
Wigan, Wrightington Hospital School	1	—	1

**Resident in Boarding Homes and
Attending Ordinary Schools, 1957**

DIABETIC	Boys	Girls	Total
Frodsham, Fir Bank Home	2	—	2

MALADJUSTED	Boys	Girls	Total
Rochdale Dunsterville Home	—	1	1

MEDICAL INSPECTION RETURNS

Year ended 31st December, 1957

TABLE I

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools

A.—PERIODIC MEDICAL INSPECTIONS

Age Groups inspected and Number of Pupils examined in each					
Entrants	----	----	----	----	11322
Second Age Group	----	----	----	----	13307
Third Age Group	----	----	----	----	9558
			Total	----	34187
Additional Periodic Inspections	----	----		----	391
			Grand Total	----	34578

B.—OTHER INSPECTIONS

Number of Special Inspections	----	----	----	----	6353
Number of Re-Inspections	----	----	----	----	11032
			Total	----	17385

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to require Treatment (excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected	For defective vision (excluding squint)	For any of the other conditions recorded in Table III	Total individual pupils
(1)	(2)	(3)	(4)
Entrants	129	1513	1642
Second Age Group	1052	1268	2334
Third Age Group	774	646	1379
Total	1955	3427	5355
Additional Periodic Inspections	44	24	65
Grand Total	1999	3451	5420

D.—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE I. A.

Age Groups Inspected	No. of Pupils Inspected	Satisfactory		Unsatisfactory	
		No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)
Entrants	11322	11166	98.6	156	1.4
Second Age Group	13307	13122	98.6	185	1.4
Third Age Group	9558	9484	99.2	74	.8
Additional Periodic Inspections	391	390	99.7	1	.3
Total	34578	34162	98.8	416	1.2

TABLE II.

Infestation with Vermin

i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	270745
ii) Total number of <i>individual</i> pupils found to be infested	3515
iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	1264
iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	114

TABLE III

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1957
A—PERIODIC INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	PERIODIC INSPECTIONS						TOTAL (including all other age groups inspected)
		Entrants		Leavers		Requiring observation (6)	Requiring treatment (7)	
		Requiring treatment (3)	Requiring observation (4)	Requiring treatment (5)	Requiring observation (6)			
4	Skin	111	90	106	41	363	223	
5	Eyes—							
	(a) Vision	129	129	774	407	1999	1318	
	(b) Squint	181	104	33	8	323	192	
6	(c) Other	38	18	13	41	96	86	
	Ears—							
	(a) Hearing	41	131	14	25	85	224	
7	(b) Otitis Media	12	52	7	6	34	87	
	(c) Other	22	22	9	7	63	50	
	Nose and Throat	523	1392	54	101	809	2043	
8	Speech	85	113	14	10	131	170	
9	Lymphatic Glands	21	537	3	15	33	713	
10	Heart	13	51	12	55	55	188	
11	Lungs	70	228	21	54	128	426	
12	Developmental—							
	(a) Hernia	36	30	1	5	54	50	
	(b) Other	18	96	4	6	43	162	
13	Orthopaedic—							
	(a) Posture	26	70	92	82	189	347	
	(b) Feet	167	167	89	79	461	363	
14	(c) Other	67	156	52	41	203	329	
	Nervous System—							
	(a) Epilepsy	7	10	3	9	20	26	
15	(b) Other	10	31	3	7	42	61	
	Psychological—							
	(a) Development	7	38	13	87	33	265	
	(b) Stability	8	50	14	12	23	109	

TABLE III. (Continued)

B.—SPECIAL INSPECTIONS

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(4)
4	Skin	54	37
5	Eyes— <i>a.</i> Vision	706	463
	<i>b.</i> Squint	82	29
	<i>c.</i> Other	20	13
6	Ears— <i>a.</i> Hearing	26	57
	<i>b.</i> Otitis Media	7	12
	<i>c.</i> Other	4	6
7	Nose and Throat	115	375
8	Speech	62	66
9	Lymphatic Glands	5	74
10	Heart	8	62
11	Lungs	20	98
12	Developmental—		
	<i>a.</i> Hernia	5	10
	<i>b.</i> Other	11	26
13	Orthopaedic—		
	<i>a.</i> Posture	26	36
	<i>b.</i> Feet	73	88
	<i>c.</i> Other	46	44
14	Nervous system—		
	<i>a.</i> Epilepsy	10	8
	<i>b.</i> Other	8	17
15	Psychological—		
	<i>a.</i> Development	31	155
	<i>b.</i> Stability	6	29
16	Abdomen	1	3
17	Other	57	59

TABLE IV.

Treatment of Pupils attending Maintained
Primary and Secondary Schools.

GROUP 1.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	1241	121
Errors of Refraction (including squint)	10153	48
Total	<u>11394</u>	<u>169</u>
Number of pupils for whom spectacles were prescribed	4102	24

GROUP 2.—DISEASES AND DEFECTS OF EAR, NOSE AND
THROAT.

	Number of cases known to have been treated	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear	—	6
(b) for adenoids and chronic tonsillitis	—	383
(c) for other nose and throat conditions	—	9
Received other forms of treatment	1000	7
Total	<u>1000</u>	<u>405</u>
Total number of pupils in schools who are known to have been provided with hearing aids		
(a) in 1957	1	5
(b) in previous years	—	12

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS.

Number of pupils known to have been treated at clinics or out-patient departments	477	1016
--	-----	------

GROUP 4.—DISEASES OF THE SKIN (excluding uncleanliness, for
which see Table II).

	Number of cases treated or under treatment during the year by the Authority
Ringworm— (i) Scalp	2
(ii) Body	4
Scabies	9
Impetigo.....	566
Other skin diseases	1277
Total	<u>1858</u>

GROUP 5—CHILD GUIDANCE TREATMENT.

No. of pupils treated at Child Guidance Clinics.....	25
--	----

GROUP 6—SPEECH THERAPY

Total number of sessions at Clinics	-----	-----	1601
No. of pupils referred for Speech Therapy	-----	-----	318
No. of pupils treated	-----	-----	317
Total attendances at Clinics	-----	-----	9223
No. of visits to Schools	-----	-----	339
No. of children examined at Schools	-----	-----	537
No. of visits to the homes of pupils	-----	-----	279

GROUP 7—OTHER TREATMENT GIVEN.

Miscellaneous Minor Ailments	---	---	8592
Pupils who received B.C.G. vaccination	-----	-----	4783

TABLE V

Dental Inspection and Treatment carried out by the Authority

(1) Number of pupils inspected by the Authority's Dental Officers—			
(a) At Periodic Inspections	---	---	70180
(b) As Specials	---	---	8824
		Total (1)	<u>79004</u>
(2) Number found to require treatment	---	---	46225
(3) Number offered treatment	---	---	41508
(4) Number actually treated	---	---	31703
(5) Number of attendances made by pupils for treatment, including those recorded at heading 11 (h) overleaf			53368
(6) Half-days devoted to : Periodic (School) Inspection	---		714
Treatment	-----	---	7984
		Total (6)	<u>8698</u>
(7) Fillings	Permanent Teeth	---	35699
	Temporary Teeth	---	5987
		Total (7)	<u>41686</u>
(8) Number of teeth filled : Permanent Teeth	---	---	28681
	Temporary Teeth	-----	5725
		Total (8)	<u>34406</u>

(9) Extractions :	Permanent Teeth	—	—	—	13425
	Temporary Teeth	—	—	—	31022
				Total (9)	<u>44447</u>
(10) Administration of general anaesthetics for extraction					<u>8820</u>
(11) Orthodontics :					
	(a) Cases commenced during the year	.....	.....		287
	(b) Cases carried forward from the previous year	.....	.....		133
	(c) Cases completed during the year	.....	.....		189
	(d) Cases discontinued during the year	.....	.....		55
	(e) Pupils treated with appliances	.....	.....		213
	(f) Removable appliances fitted	.....	.....		192
	(g) Fixed appliances fitted	.....	.....		47
	(h) Total attendances	.....	.....		<u>1822</u>
(12) Number of pupils supplied with artificial dentures					<u>200</u>
(13) Other Operations :	Permanent Teeth	.....	—	—	4945
	Temporary Teeth	.....	—	—	1467
				Total (13)	<u>6412</u>

TABLE VI.

Number of handicapped pupils examined in School.

Defect	Number of	
	New Cases	Re-exams.
Blind	—	1
Partially Sighted	14	28
Deaf	4	7
Partially Deaf	4	15
Delicate	17	184
Diabetic	9	11
E.S.N.	71	375
Epileptic	19	99
Maladjusted	2	9
Physically Handicapped	37	216
Speech Defect	15	68

TABLE VII.

Medical Examinations at School Clinics	4130
Number of children examined for part-time employment.....	1245
Number of Special Reports completed on children examined at—	
Schools —	152
School Clinics —	324
Homes of Pupils	470
	946

LIST OF SCHOOL CLINICS

Clinic	Address	Type of Clinic	Day held
ALSAGER	15, Centre Court, Alsager.	Minor Ailment	Mon. to Fri. a.m.
		Doctor's Sessions	1st & 3rd Fri. (11 a.m.—12-15 p.m.)
		E.N.T. Eye	3rd Mon. p.m. 1st & 3rd Wed. a.m.
ALTRINCHAM	12, The Mount, Altrincham.	Minor Ailment	Mon. a.m.
		Doctor's Sessions	2nd and 4th Mon. a.m.
	145, Park Road, Timperley.	Minor Ailment	Wed. a.m.
		Doctor's Sessions	1st & 3rd Wed. a.m.
69 Station Bldgs, Altrincham.	Speech	Tues. a.m. & p.m. Fri. p.m. only.	
BARNTON	Methodist School Room, Runcorn Road, Barnton.	Minor Ailment	Wed. a.m.
BEBINGTON	Council Offices, Bromborough.	Minor Ailment	1st Tues. a.m.
		Doctor's Sessions	When required.
	218, Bebington Road, Bebington.	Speech	Tues. a.m. & p.m. Wed. a.m. and p.m.
St. Mark's Parish Room, Grove Street, New Ferry.	Minor Ailment	Mon., Wed., Fri. p.m.	
	Doctor's Sessions	Wed. p.m.	
	Eye	Fri. a.m. & 3rd Sat. a.m.	
BOLLINGTON	Wellington Rd., Bollington, Macclesfield.	Minor Ailment	Tues. a.m.
		Doctor's Sessions	1st Tues. a.m.
		E.N.T.	Odd Mths. 1st Fri. p.m.
		Eye	2nd Tues. p.m.
BREDBURY	Lower Bents Lane, Bredbury.	Minor Ailment	Thurs. a.m.
		Doctor's Sessions	Thurs. a.m. as required
		Eye	2nd & 5th Thurs. a.m. (whenever necessary)
CHEADLE	Brookfield, Wilmslow Road, Cheadle.	Minor Ailment	Mon. a.m.
		Doctor's Sessions	1st Mon. a.m.
		Eye	Tues. a.m.
		E.N.T.	Even Months 2nd Mon. p.m.
		Speech	Tues. p.m., Fri. a.m. p.m.
CHEADLE HULME	Parish Hall, Church Road, Cheadle Hulme.	Minor Ailment	Wed. p.m.
		Doctor's Sessions	4th Wed. p.m.
		Eye	2nd & 3rd Thurs. a.m.
CONGLETON	Park Street, Congleton.	Minor Ailment	Mon. a.m.
		Doctor's Sessions	1st, 3rd & 5th. Mon. a.m.
		E.N.T.	Odd Mths. 4th Thurs. a.m.
		Eye	2nd Wed. p.m.
		Speech	Tues. p.m.

REWE	201 Edleston Rd., Crewe.	Speech	Mon. & Wed. a.m. & p.m. Tues. a.m.
	Ludford Street, Crewe.	Minor Ailment Doctor's Sessions E.N.T. Eye Paediatric	Mon. & Wed. a.m. Mon. & Wed. a.m. 3rd Fri. a.m. 1st, 2nd, 4th & 5th Fri. a.m. 3rd Fri. p.m.
	Stalbridge Road, Crewe.	Minor Ailment Doctor's Sessions Eye Paediatric	Tues. a.m. 1st & 3rd Tues. a.m. As Required 1st Fri. p.m.
DUKINFIELD	King Street, Dukinfield.	Minor Ailment Doctor's Sessions E.N.T. Eye	Mon. to Thurs. a.m. Tues. a.m., Fri. a.m. 4th Mon. p.m. 1st, 2nd & 4th Fri. p.m.
ELLESMERE PORT	York Road, Ellesmere Port.	Minor Ailment Doctor's Sessions E.N.T. Eye Speech	Mon. & Thurs. a.m. Thurs. a.m. Alt. Mon. a.m. Fri. a.m. Tues. a.m.
FRODSHAM	The Rock Clinic, High Street, Frodsham.	Minor Ailment Doctor's Sessions E.N.T. Eye	As Required As Required Odd Mths. 3rd Thurs. a.m. 4th Thurs. a.m. 2nd Wed. a.m.
HALE	Lister House, 9 Broomfield Lane, Hale.	Minor Ailment Doctor's Sessions Eye	Mon. & Fri. p.m., Wed. a.m. 1st & 3rd Fri. p.m. Tues. a.m.
HAZEL GROVE	253, London Rd., Hazel Grove.	Minor Ailment Doctor's Sessions E.N.T. Eye Speech	Tues. a.m. 2nd Tues. a.m. Even Mths. 3rd Thurs. a.m. 1st & 4th Thurs. a.m. Mon. a.m.
HESWALL	Telegraph Road, Heswall.	Minor Ailment Doctor's Sessions Eye Speech	Tues. p.m. 1st & 3rd Tues. p.m. 2nd & 4th Fri. p.m. Fri. a.m. & p.m.
HOLLING- WORTH	Wedneshaugh Green, Hollingworth.	Minor Ailment	Tues. p.m.
HOOLE	55, Hoole Road, Hoole.	Minor Ailment Doctor's Sessions Eye Speech	2nd Wed. p.m. 2nd Wed. p.m. 2nd & 5th Thurs. p.m. Fri. a.m. & p.m.
HOYLAKE	Broomfield, Meols Drive, Hoylake.	Minor Ailment Doctor's Sessions Eye Speech	Fri. a.m. Fri. a.m. 1st & 3rd Fri. p.m. Mon. a.m. & p.m.

HYDE	Reform Club Buildings, Market Place, Hyde.	Minor Ailment	Mon., Wed. & Fri. a.m.
		Doctor's Sessions	Mon. a.m.
		Eye (Specialist)	1st Tues. a.m. 3rd. Fri. p.m.
		Eye (D.M.C.)	4th Tues. a.m.
		Speech	Wed., Thurs. a.m. & p.m.
KNUTSFORD	County Offices, Bexton Road, Knutsford.	Minor Ailment	Wed. a.m.
		Doctor's Sessions	2nd & 4th Wed. a.m.
		Eye	3rd Thurs. p.m.
LITTLE SUTTON	Chester Road, Little Sutton,	Minor Ailment	Fri. a.m.
		Speech	Tues. p.m., Wed. a.m.
LYMM	29, Eagle Brow, Lymin.	Minor Ailment	Wed. a.m. 2nd & 4th Wed. p.m.
		Doctor's Sessions	2nd & 4th Wed. p.m.
		Eye	4th & 5th Thurs. p.m.
MACCLESFIELD	Sanders Square, Macclesfield, Pierce Street, Macclesfield.	Minor Ailment	Mon. & Thurs. a.m.
		Minor Ailment	1st Mon. p.m. Thurs. p.m. Tues. & Fri. a.m.
	Doctor's Sessions	Fri. a.m. (except 1st Fri.)	
	E.N.T.	1st Fri. a.m.	
	Eye	1st Mon. p.m. 1st, 3rd & 4th Tues. p.m., 4th Thurs. a.m.	
	52, Bridge St., Macclesfield.	Speech	Thurs. a.m. & p.m. & Fri. a.m.
MALPAS	Jubilee Hall, Malpas.	Minor Ailment	Thurs. p.m.
MARPLE	Stockport Rd., Marple.	Minor Ailment	Wed. a.m.
		Doctor's Sessions	2nd Wed. a.m.
		Eye	3rd Thurs. a.m.
MIDDLEWICH	The Priory, 85, Wheelock St., Middlewich.	Minor Ailment	Mon. a.m.
		E.N.T.	Even Mths. 4th Thurs. a.m.
		Eye	3rd Tues p.m.
NANTWICH	The Dowery, Barker Street, Nantwich.	Minor Ailment	Wed. a.m.
		Doctor's Sessions	2nd & 4th Mon. a.m.
		Eye	2nd, 3rd, 4th & 5th Thurs. a.m.
NESTON	Mellock Lane Neston.	Minor Ailment	Tues. a.m.
		Doctor's Sessions	1st & 3rd Tues. a.m.
		Eye	1st Wed. a.m.
		Speech	Thurs. a.m.
NORTHWICH	Parkfield, Middlewich Rd., Northwich.	Minor Ailment	Mon., Wed., Fri. & 1st Thurs. a.m.
		E.N.T.	2nd Fri. a.m.
		Eye	1st, 2nd & 3rd Thurs. a.m.
	Darland House, Winnington Hill, Northwich.	Minor Ailment	Tues. a.m. Fri. p.m.
	Paediatric Speech	4th Mon. p.m. Mon. a.m. & p.m. Thurs. a.m.	

BOYNTON	Park Lane, Boynton.	Minor Ailment Doctor's Sessions E.N.T. Eye	Tues. p.m. 1st & 3rd Tues. p.m. Even Mths. 3rd Wed. p.m. 2nd Thurs. p.m.
ROMILEY	Leyfield Ave., Romiley.	Minor Ailment	Mon., Wed. & Fri. a.m.
RUNCORN	28, Halton Road, Runcorn.	Minor Ailment Doctor's Sessions Eye Speech	Mon. & Fri. a.m. 2nd & 4th Fri. a.m. Tues. p.m. Mon. a.m., Wed. a.m. & p.m.
SALE	70, Chapel Road, Sale.	Minor Ailment Doctor's Sessions Eye Speech	Wed. a.m. Wed. a.m. Mon. p.m. Wed. a.m., Thurs. p.m.
SANDBACH	Marriott House, Sandbach.	Minor Ailment Doctor's Sessions E.N.T. Eye	Fri. a.m. 1st & 3rd Fri. a.m. (9-15 a.m. to 10-30 a.m.) 4th Fri. a.m. 2nd, 3rd & 4th Mon. p.m.
STALYBRIDGE	High Street, Stalybridge.	Minor Ailment Doctor's Sessions Eye	Mon., Wed. & Fri. a.m. Mon. a.m. 2nd, 3rd, 4th Tues. a.m.
STALYBRIDGE	Huddersfield Rd., Millbrook.	Minor Ailment	Mon. & Thurs. a.m.
STOCKTON HEATH	65 Whitefield Rd. Stockton Heath.	Minor Ailment Doctor's Sessions Eye Speech	Mon.—Fri. 9-10 a.m. 2nd Thurs. a.m. if required 4th Tues. p.m. Thurs. a.m. & p.m.
TARPORLEY	Victory Hall, Tarporley.	Minor Ailment Doctor's Sessions Eye	Fri. a.m. 4th Fri. a.m. 1st Thurs. p.m.
TATTENHALL	Barbour Institute, Tattenhall.	Minor Ailment	Wed. a.m.
WEAVERHAM	Church Lane, Weaverham.	Minor Ailment Doctor's Sessions Eye	Fri. a.m. 1st & 3rd Fri. a.m. 3rd Fri. p.m.
WILMSLOW	3, Alma Lane, Wilmslow.	Minor Ailment Doctor's Sessions E.N.T. Eye	Thurs. a.m. 1st Thurs. a.m. Even Mths. 4th Wed. p.m. 1st Tues. p.m.
WINSFORD	98, Weaver St., Winsford.	Minor Ailment E.N.T. Eye	Mon. p.m. 2nd Wed. p.m. 1st Thursday a.m. 3rd & 4th Thurs. p.m.

